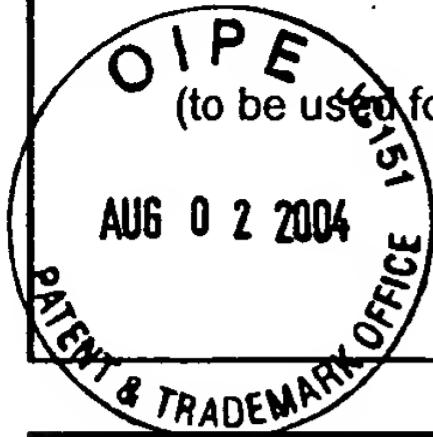


TRANSMITTAL FORM



| | |
|----------------------|-----------------------|
| Application No. | 09/993,342 |
| Filing Date | 11/05/2001 |
| First Named Inventor | Blackburn |
| Examiner Name | Not known |
| Group Art Unit | 1744 |
| Attorney Docket No. | A-68718-4/RMS/RMK/JML |

ENCLOSURES (check all that apply)

| | | |
|--|--|--|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input checked="" type="checkbox"/> Petition to Accept an Unintentionally Delayed Claim . . . for the Benefit of a Prior Filed Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | <input type="checkbox"/> ■Preliminary Amendment |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | <input type="checkbox"/> ■Declaration for Patent Application |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, No. of CD(s) _____ | <input type="checkbox"/> ■Check #300162(\$1300) |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | Remarks | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | The Commissioner is Authorized to debit any underpayment or credit any overpayment of fees in connection herewith to our Deposit Account No. 50-2319 (463037-200/RMS/RMK/JML). | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | |
|-------------------------|---|-----------------------|
| Firm or Individual name | Jennifer M. Lane, Patent Agent, Reg. No. 51,916, for Robin M. Silva, Reg. No. 38,304 DORSEY & WHITNEY LLP 4 Embarcadero Center, Suite 3400 San Francisco, CA 94111 Telephone: 415/81 1989 | Customer Number 32940 |
| Signature | | |
| Date | JUNE 19, 2003 | |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:

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EXHIBIT A

DORSEY & WHITNEY LLP

Applicant
Serial No
For:
Please act

Blackburn et al.
09/993,342 ✓
For: DEVICES AND METHODS FOR BIOCHIP MULTIPLEXING

Please acknowledge receipt of the enclosed

PETITION TO ACCEPT AN UNINTENTIONALLY DELAYED CLAIM FOR
THE BENEFIT OF A PRIOR FILED PROVISIONAL APPLICATION; PRELIMINARY
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by imprinting the Patent Office "date stamp" hereon and returning to the addressee
indicated on the reverse.

Due: JUN
Certificate

Due: JUNE 22, 2003
Certificate of mailing: JUNE 19, 2003

